



Application for **Corporate** Membership

Dear Applicant,

Thank you in advance for considering a Corporate membership with the Society of Camera Operators (SOC).

The SOC also offers other advertising opportunities in our quarterly *Camera Operator* magazine, sponsoring our annual Lifetime Achievement Awards and digital connections such as our eNewsletter and website banners. To learn more about advertising offers or for us to craft a customized annual sponsorship/marketing package, please contact our Director of Sales, Matt Price directly at mattprice@soc.org or 310-482-8071.

Thank you again for your generosity and if you have any questions, please don't hesitate to contact us at the SOC office (818) 563-9110 or by email socoffice@soc.org.

As a Corporate Member of the SOC you receive the following benefits:

- Corporate member Logo and URL link posted on the SOC website.
- Corporate member listed in the SOC quarterly magazine, *Camera Operator*.
- Two email blasts annually for SOC member events, Corporate Member services or offer announcements that benefit the SOC membership. (Minimum of 15-day window in requesting email. HTML must be built by Corporate Member)
- Priority communication to participate in SOC events, workshops, awards etc.
- Quarterly emails alerting you of upcoming events, other ways of engaging our membership and overall member news.
- SOC Corporate Member digital seal, which we welcome you to display on your website and printed materials.
- Opportunity to sponsor SOC sanctioned events for membership attendance.

*** New Corporate Members will be presented with a beautiful custom calligraphic certificate.

What To Send:

- Completed application. Sign and date the application.
- Check or money order for annual dues: Funds must be in U.S. dollars.
- Company digital logo (tiff, jpeg or png format) to socoffice@soc.org.

Where To Send:

Society of Camera Operators
Attn: Membership Committee Chairperson
PO Box 2006
Toluca Lake, CA 91610
Or email to socoffice@soc.org



Application for Corporate Membership

(please print clearly, type or complete in Acrobat Reader)

Check# _____
Amount: _____
Date: _____

Office Use Only

Company Name: _____

Address Line 1: _____

Address Line 2: _____

City: _____ State/Province: _____

Country: _____ Zip/Postal Code: _____

Main Phone: _____ Website: _____

Services or Products Rendered: _____

Representative Information

Representative's Name: _____

Title: _____ Email: _____

Providing your email address grants us permission to keep you informed of SOC news and events via this medium. It will not be sold or provided to any third party for any reason. All SOC email originates from our Webmaster. You may opt-out any time.

Direct Phone Line: _____ Cell: _____

Accounting Information

Accounting Contact Name: _____ P.O. # (if applicable): _____

Direct Phone Line: _____ Email: _____

Membership Packages (Please check one):

	Dues	Terms
<input type="checkbox"/> Annual Corporate Membership	\$1400	12 months
<input type="checkbox"/> Multi-Year (4 yr.) Corporate Membership (\$800 discount)	\$4800	48 months

Applicant's Signature: _____

Print Name: _____ Date: _____

(Office Use Only)

PRESIDENT: _____ Date Approved: _____

APPROVING BOARD MEMBER: _____ Approved Membership Type: _____